Best Available Copy

										Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 0.9/108/29													,		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN		OR	OTHER SMALL			
TOTAL CLAIMS								RATE		FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			/8 minus 20=					X\$ 9	-		OR	X\$18=			
INDEPENDENT CLAIMS			4 minus 3 =					X40=	. 1		OR	X80=	80-		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=				OR	+270=			
• 11	the difference	ro, ente	r "0" in c	olumn 2		TOTA	4		OR	<u> </u>	790-				
* If the difference in column 1 is less than zero, enter *0* in column 2 CLAIMS AS AMENDED - PART II												OTHER			
(Column 1) 8-5-04 (Column 2) (Column 3)								SMAL	TE	NTITY	OR	SMALL	NTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST BER OUSLY FOR	PREŠENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. /8	Minus	3	10	=		X\$ 9-	- [OR	X\$18=			
	Independent	· Ÿ	Minus	*** (4	=-		X40=			OR	X80=			
E	FIRST PRESENTATION OF MULTIPLE DEPENDENT			TCLAIM			+135	╗	-		+270=				
								101		•	OR	TOTAL			
	<i>.</i>								EE		OR	ADDIT. FEE			
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-										1		ADDI-			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUA PREVI	ABER OUSLY FOR —	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE		
	Total	. 18	Minus	••		=		X\$ 9	-		OR	X\$18=			
	Independent	. 4	Minus	***		-]	X46-	J		OR	X80≃			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL						J	+135	_		OR	+270=			
								TO	AL		OR	TOTAL			
		40-h 4\		(Colu	ımn 2)	(Column 3)		ADDIT. F	EEI		_	AUUII. PEE			
	James .	(Column 1)	3	HIG	HEST	T	1		-	ADDI-	1		ADDI-		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT		RAT	Ξ	TIONAL FEE		RATE	TIONAL FEE		
	Total		Minus	:-				XS 9	=		OR	XS18=			
	Independent	•	Minus	•••		•		X40:			ОЯ	X80=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.40-			1	070			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	TOTAL			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE															
l "	The Tighest Nu	umber Previously Pa mber Previously Pa	aid For (Total o	r Indepen	dent) is th	e highest numb	er lo	und in th	e apl	propriate bo	x in c	otumn 1.			

FORM PTO-87

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